

Integrated Impact Assessment (IIA)

Part 1 Scoping

1 Details of the Proposal

Title of Proposal:	Review of Learning Disability Day service provision (SB cares and Cornerstone) across Scottish Borders
What is it?	A revised Policy/Strategy/Practice
<p>Description of the proposal: (Set out a clear understanding of the purpose of the proposal being developed or reviewed (what are the aims, objectives and intended outcomes, including the context within which it will operate))</p> <p>Aim - Review and re-provide day support for some adults with learning disabilities. The review will engage stakeholders and benchmark service provision with other local authorities in Scotland and propose alternative service provision. This will include the new digital strategy to support providing services in different ways to reduce isolation and increase social interaction. This is likely to be a change from purely building to community /building based hybrid model of support.</p> <p>Our ways of working</p> <ul style="list-style-type: none"> • A blend of building bases and community/outreach model of support in each of the 5 localities <p>Outcomes</p>	

We start with people's strengths-

- People develop a **sense of purpose** through what they love doing and how they contribute to others in their local community.
- People develop and maintain **friendships**

The kinds of things people want to do:

- **Outdoor and local opportunities** for people to be part of
- Opportunities **for fitness and wellbeing**
- Opportunities around enjoying and **contributing to others through food**- cooking, baking sharing and growing.
- Opportunities to take part in the **arts, music, local history** and leisure in a way that connects people with like-minded people.
- Opportunities to **try new things, explore** existing and new hobbies, and see what is going on

Enablers and Support to achieve these outcomes:

- People have a **way of getting around**
- Families want **personalised support**
- **Families and people with learning disabilities get a break from one another**
- **Personalised finance options** to increase flexibility of support
- **A place to be** and meet others- which is accessible and can be a place from which to branch out.
- The place we come together, and meet is **open to others in the local community**, rather than a segregated closed space.

Stakeholders included in building the model are -

People who currently use SB Cares and Cornerstone Day support services and their families; SB cares, Cornerstone (existing commissioned provider); 2 open events held Dec 21 and April 22 for any Provider to work with the core team sharing information; Learning Disability Service; senior leadership teams in SBC and Health and Social Care Partnership. Full group identified in Communication strategy.

Service Area: Department:	Scottish Borders Learning Disability Service
Lead Officer: (Name and job title)	Simon Burt General manager Learning Disabilities and Mental health
Other Officers/Partners involved: (List names, job titles and organisations)	Jen Holland – Director of Strategic Commissioning and Partnerships ; Lisa Sansom – Service Manager SB Cares; Julie Glen – Operations Director SB Cares; Elaine Firth – Service Manager, SB Cares; Andrew McInnes- Area manager – Cornerstone; Susan Henderson – Planning and Development Officer, Learning Disability Service; Douglas Ireland – Acting Group Manager Learning Disability Service; Iain Davidson, – Employee Relations Manager; Mark Williamson – HR Business Partner; various family members; Social workers from Learning Disability Service; Sue Bell – SBC Communications team; John Yallop Senior Finance Officer, SBC finance team; Vivienne Kennedy Senior Contracts officer, SBC; Claire Veitch Local Area Coordinator Manager, SBC
Date(s) IIA completed:	Feb 2021; Feb 2022, April 2022

2 Will there be any cumulative impacts as a result of the relationship between this proposal and other policies?

No
If yes, - please state here:

3 Legislative Requirements

3.1 Relevance to the Equality Duty:

Do you believe your proposal has any relevance under the Equality Act 2010? YES

(If you believe that your proposal may have some relevance – however small please indicate yes. If there is no effect, please enter “No” and go to Section 3.2.)

Equality Duty	Reasoning:
Elimination of discrimination (both direct & indirect), victimisation and harassment. <i>(Will the proposal discriminate? Or help eliminate discrimination?)</i>	Increasing social interaction and reducing social isolation will assist in eliminating discrimination.
Promotion of equality of opportunity? <i>(Will your proposal help or hinder the Council with this)</i>	Enabling service users to maximise their opportunity and independence will help with equality of opportunity.
Foster good relations? <i>(Will your proposal help or hinder the council s relationships with those who have equality characteristics?)</i>	A focus on gaining independence and increasing social interaction will help in fostering good relationships. Although there may be opposition by families, with the potential for this to be perceived as a Council cost savings exercise

3.2 Which groups of people do you think will be or potentially could be, impacted by the implementation of this proposal? (You should consider employees, clients, customers / service users, and any other relevant groups)				
Please tick below as appropriate, outlining any potential impacts on the undernoted equality groups this proposal may have and how you know this.				
	Impact			Please explain the potential impacts and how you know this
	No Impact	Positive Impact	Negative Impact	
Age Older or younger people or a specific age grouping		X		Enabling service users to maximise their opportunity and independence will aid groups of all ages. Planning ahead as part of transition process will improve opportunities or support better design of support. Potential negative impact is staff change – continuity of care and support affected may impact on supported people. Risk of shift in quality of support at Transition of service provision.

Disability e.g. Effects on people with mental, physical, sensory impairment, learning disability, visible/invisible, progressive or recurring		X	X	<p>Enabling service users to maximise their opportunity and independence will aid groups of all ages. Planning ahead as part of transition process will improve opportunities or support better design of support.</p> <p>Potential negative impact is staff change – continuity of care and support affected may impact on supported people. Risk of shift in quality of support at Transition of service provision.</p>
Gender Reassignment Trans/Transgender Identity anybody whose gender identity or gender expression is different to the sex assigned to them at birth	X			
Marriage or Civil Partnership people who are married or in a civil partnership	X			
Pregnancy and Maternity (refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth),	X			
Race Groups: including colour, nationality, ethnic origins, including minorities (e.g. gypsy travellers, refugees, migrants and asylum seekers)	X			
Religion or Belief: different beliefs, customs (including atheists and those with no aligned belief)	X			
Sex women and men (girls and boys)	X			
Sexual Orientation , e.g. Lesbian, Gay, Bisexual, Heterosexual	X			

3.3 Fairer Scotland Duty

This duty places a legal responsibility on Scottish Borders Council (SBC) to actively consider (give due regard) to how we can reduce inequalities of outcome caused by socioeconomic disadvantage when making strategic decisions.

The duty is set at a strategic level - these are the key, high level decisions that SBC will take. This would normally include strategy documents, decisions about setting priorities, allocating resources and commissioning services.

Is the proposal strategic? YES

Yes (*please delete as applicable*)

If No go to Section 4

If yes, please indicate any potential impact on the undernoted groups this proposal may have and how you know this:

	Impact			State here how you know this
	No Impact	Positive Impact	Negative Impact	
Low and/or No Wealth – enough money to meet basic living costs and pay bills but have no savings to deal with any unexpected spends and no provision for the future.	X			
Material Deprivation – being unable to access basic goods and services i.e. financial products like life insurance, repair/replace broken electrical goods, warm home, leisure and hobbies	X			
Area Deprivation – where you live (e.g. rural areas), where you work (e.g. accessibility of transport)		X		Retaining day support service in each of the 5 localities supports those living in rural areas having to travel less distance
Socio-economic Background – social class i.e.	X			

parents' education, employment and income				
Looked after and accommodated children and young people	X			
Carers paid and unpaid including family members		X		Increasing options for service users will provide greater respite opportunities for carers.
Homelessness	X			
Addictions and substance use	X			
Those involved within the criminal justice system	X			

4 Full Integrated Impact Assessment Required

Select No if you have answered "No" to all of Sections 3.1 – 3.3.

Yes

If a full impact assessment is not required briefly explain why there are no effects and provide justification for the decision.

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Signed by Lead Officer:	Simon Burt
Designation:	General Manager Mental Health and Learning Disabilities
Date:	
Counter Signature Director	Chris Myers
Date:	IJB Chief Officer / Director of Health and Social Care, Scottish Borders Health and Social Care Partnership

Part 2 Full Integrated Impact Assessment

5 Data and Information

What evidence has been used to inform this proposal?

(Information can include, for example, surveys, databases, focus groups, in-depth interviews, pilot projects, reviews of complaints made, user feedback, academic publications and consultants' reports).

Commissioning LD day support has been a journey for over 10 years and support arrangements have undergone several re-configurations to ensure that they are fit for purpose. The last significant review was in 2011 with a shift to more localised support, disinvestment in some buildings based support, and re-investment in Local Area Coordination support. We need to continue on the journey of modernisation of locally based services that maximise independence of individuals, ensuring there are some buildings based services for those with the most complex needs. Our focus needs to continue to shift towards meeting people's outcomes in a variety of settings and models that can respond flexibly.

National context

The Public Bodies (Joint Working) (Scotland) Act: This Act changed how services were commissioned across health & social care in recent years. Setting the framework for the integration of Health & Social Care, this Act required integration partners to prepare a strategic plan for their area, setting out arrangements for the delivery of integration functions and how the national health and wellbeing outcomes will be met. Commissioning of social care services is now the responsibility of integration authorities via health and social care partnerships.

Scottish Government review of social care: The COVID-19 pandemic reset and refocused the agenda on social care. The Review engaged with people and organisations including those who have lived experience of using social care services and supports, carers and families. This resulted in options and recommendations that cut across: funding, delivery, governance and regulation, and how continuous improvement can be assured in social care services.

Self Directed Support (SDS): SDS Provides four options for people, providing different degrees to which they are directly involved in organising their care. The aim of SDS is to help people live better lives by making sure that people get the kind of support they want - support that is personalised.

Background evidence:

<https://ihub.scot/media/8322/new-models-for-day-support-collaborative-evidence-summary-v10.pdf>

Local context

The Health & Social Care Partnership Strategic Plan: This Strategic plan 2018-2021 had three aims. That Learning Disability Day Services provide meaningful activity for assessed support needs towards meeting supported people's outcomes and maintaining the health and well being of their carers. In turn this supports the wider aims of the local strategic plan.

Fit for 2024: This programme aims to prepare for and meet the predicted demands for services; the challenges of meeting the needs of our growing older population, the need to grow the economic performance of the area; the far-reaching reforms in Health and Social Care; new requirements in Education; rapid digital transformation as a continuous and permanent feature of our environment; new duties under tackling Poverty and Inequality and budgetary, legislative and regulatory impacts as a re-driving improvement through collaboration.

Scottish Borders Council Local Plan – key areas: Clean, green future – locally based services ;Fulfilling our potential – outcomes focused individual planning and occupation; Empowered, vibrant communities – being part of and shaping local communities Good health and wellbeing – meeting physical and mental health needs; Working together, improving lives – of both families and carers.

Outcomes focused Commissioning: Traditional commissioning of services is the process by which councils would decide how to spend their money to get the best possible services. Our future commissioning will aim to achieve the best possible outcomes for individuals and communities by understanding and accessing collective resources. We must also achieve best value, national quality standards, Equality, keeping people safe and involving them in why, how and what we commission.

Place making: This approach is in line with the Cosla Place Principle for “A more joined-up, collaborative and participative approach to services, land and buildings, across all sectors within a place, enables better outcomes for everyone and increased opportunities for people and communities to shape their own lives”.

Learning Disability Specific - National

The Keys to Life (2013) and implementation plan: The **keys to life strategy** recognises that people who have a learning disability have the same aspirations and expectations as everyone else and is guided by a vision shaped by the Scottish Government's ambition for all citizens. The 2019-2021 implementation framework focuses on 4 key areas: Healthy life; choice and control; independence; active citizenship.

Principles of Good Transitions 3: The Principles of Good Transitions 3 provides a framework to inform, structure and encourage the continual improvement of support for young people with additional needs between the ages of 14 and 25 who are making the transition to young adult

life. It is divided into 8 parts with seven key principles of good transitions. Scottish Borders Learning Disability Services have led improvements in this area locally.

The Charter for Involvement: The **Charter for Involvement** is written by the National **Involvement** Network. It sets out in their own words how supported people want to be **involved** in the support that they get in the organisations that provide their services.

Learning Disability specific – local

Scottish Borders Learning Disability Strategic Commissioning Plan 2016-19: This strategy set out the commissioning priorities for the Learning Disability Service or the period from 2016 – 19. A key element of this strategy was to review the impacts of the previous review of Day Services. The new strategic commissioning plan was paused during COVID-19 and consultation will be restarted.

Other information Post pandemic: The COVID-19 Pandemic has changed life for everybody over the past two years and perhaps for the years to come. We will not return to exactly how things were before.

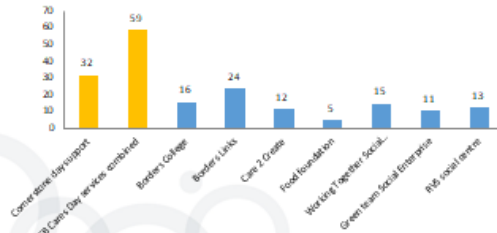
We need to: strengthen resilience and create efficiency through collaboration and innovation: maximise the use of resources that are both commissioned and community led; have services tailored to individuals and their communities that are outcomes focussed; involve people, community groups, the third sector interfaces, organisations and service teams in the commissioning processes; embrace and use technology by using technology as a partner. Prior to the COVID-19 pandemic there were 187 people with learning disability attending some form of day time opportunity.

Information gathered from LD social workers what matters assessments; engagement work through National Development team for Inclusion in spring 2021. Various families meetings, staff engagement sessions, Borders carer centre engagement; meeting with senior leadership staff; local elected members.



Recap: the case for change Learning disability service day support data

187 individuals attending a range of day support opportunities as of March 2020 (pre COVID)



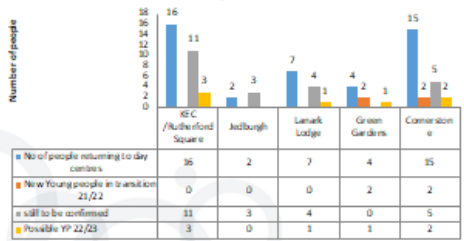
Prior to COVID-19 there were 187 adults with learning disabilities attending some form of day time opportunity.

The scope of this review is to modernise the traditional day services within SB Cares and Cornerstone – a total of 6 day centres with 91 attendees.

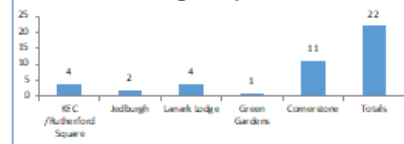


Recap: the case for change Learning disability service day support data

LD day service review planning data July 2021

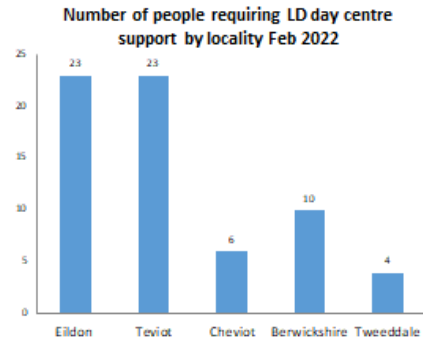


Not returning to day centres 2021





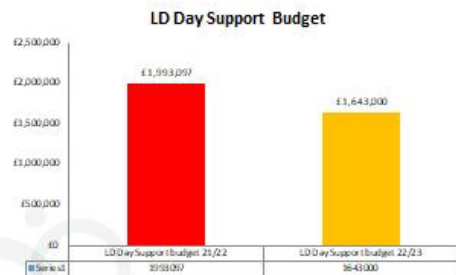
The case for change: Learning disability service day support current data



- Mixed model approach: some buildings based; community outreach; home and alternatives e.g. Direct Payments, increased Provider support
- Currently still operating COVID safe 1m distancing



Recap: The case for change Current & Future levels of council resources



← Within the budget, £350k of efficiencies in LD Day Services are planned over the next 2 years

- Continue to develop daytime support in line with earlier reviews
- Services need to be locality based in line with national and local strategic direction.
- Services need to support individuals to achieve their outcomes and promote independence and individuality as highlighted through consultation.
- Services need to be provided from within the available budget.
- Build the specification and quality questions – looking for families who might want to take part in this.
- The new service specification will be written and presented to the IJB for directions June 2022.
- A formal commissioning process will begin in the summer with new services from November 2022 onwards.

Describe any gaps in the available evidence,-then record this within the improvement plan together with all of the actions you are taking in relation to this (e.g. new research, further analysis, and when this is planned)

Please state your answer here

Data for young people coming through Transition in 2023-24 – plan to gather this in May 2022

6 Consultation and Involvement

Which groups are involved in this process and describe their involvement

Supported people and families: NDTi independent engagement sessions in 2021 and graphic outputs fed into review; offer to participate in MS teams meetings; offer to be involved in building specification and setting quality questions for tendering services to the market; presentations shared.

Day support staff: MS teams meetings; meetings with managers and HR; Trade Unions involved throughout and presentations 2021, 2022

Briefings to elected members throughout at key decision points

LD service – emails – some direct involvement from key participants

LD providers: PIN notice sent out and 2 market engagement sessions Dec 21, April 22

SBC and IJB – briefing papers and discussions on MS teams and presentations

Borders carer centre – MS teams meetings and presentation Feb 22

Set up email box for specific questions from SB cares staff; FAQ developed 2022

Describe any planned involvement saying when this will take place and who is responsible for managing the process

Continued offer to families to engage. 2 further sessions planned for May 22

Families invited to be part of evaluation and specification setting and take part in interview process. Anticipate that a few families will want to take part from engagement to date.

Describe the results of any involvement and how you have taken this into account.

Feedback from all engagement sessions, emails, conversations and participation in online meetings collated. These will inform the service specifications and help to direct the quality question setting for the tender process.

What have you learned from the evidence you have and the involvement undertaken? Does the initial assessment remain valid? What new (if any) impacts have become evident?

(Describe the conclusion(s) you have reached from the evidence, and state where the information can be found.)

Importance of getting it right for supported people and family carers need for respite; mixed model of support essential;
Continuity of care and support essential for this group of people

7 Mitigating Actions and Recommendations

Consider whether:

Could you modify the proposal to eliminate discrimination or reduce any identified negative impacts? (If necessary, consider other ways in which you could meet the aims and objectives of the proposal.)

Could you modify the proposal to increase equality and, if relevant, reduce poverty and socioeconomic disadvantage?

Describe any modifications which you can make without further delay (e.g. easy, few resource implications)

Mitigation Please summarise all mitigations for approval by the decision makers who will approve your proposal			
Equality Characteristic/Socio economic factor	Mitigation	Resource Implications (financial, people, health, property etc.)	Approved Yes/No
Age, Disability	All families invited to be involved in specification setting. Small number of families involved in writing service specification and evaluation questions. 2 workshops with providers pre –tender to lay out expectation and discuss opportunities		

	Continuity of care – clear transition plans and sharing of support plan information across organisations		
	Accessible buildings available as the base for services		

8 Recommendation and Reasoning *(select which applies)*

- Implement proposal with no amendments
- Implement proposal taking account of mitigating actions (as outlined above)
- Reject proposal due to disproportionate impact on equality, poverty, health and Socio-economic disadvantage

Reason for recommendation:

Signed by Lead Officer:	Simon Burt
Designation:	General manager Mental Health and Learning Disability Services
Date:	
Counter Signature Director	Chris Myers
Date:	IJB Chief Officer / Director of Health and Social Care, Scottish Borders Health and Social Care Partnership

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This assessment should be presented to those making a decision about the progression of your proposal.

If it is agreed that your proposal will progress, you must send an electronic copy to corporate communications to publish on the webpage within 3 weeks of the decision.

Complete the below two sections. For your records, please keep a copy of this Integrated Impact Assessment form.

Action Plan (complete if required)

Actioner Name:	Action Date:
What is the issue?	
What action will be taken?	
Progress against the action:	
Action completed:	Date completed:

Monitoring and Review

State how the implementation and impact of the proposal will be monitored, including implementation of any amendments? For example what type of monitoring will there be? How frequent?

Please state your answer here

What are the practical arrangements for monitoring? For example who will put this in place? When will it start?

Please state your answer here

When is the proposal due for review?

Please state your answer here

Who is responsible for ensuring that this happens?

Please state your answer here